

# Young Women's Drinking Experiences in Public Drinking Venues

Funded by the Foundation for Alcohol Research and Education

Prepared by the Queensland University of Technology

DECEMBER 2011



Foundation for Alcohol  
Research & Education

# **YOUNG WOMEN'S DRINKING EXPERIENCES IN PUBLIC DRINKING VENUES**

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**July 2011**



*The Centre for Accident Research & Road Safety - Queensland  
is a joint venture initiative of the Motor Accident Insurance  
Commission*



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## Executive Summary

Alcohol-related mortality and morbidity represents a substantial financial burden to communities across the world. In Australia, conservative estimates place the societal cost (2004-2005) for alcohol abuse at approximately 15.3 billion dollar annually (Collins & Lapsley, 2008). Research has found that adolescence and young adulthood is a peak period for heavy episodic alcohol consumption, with over a third of all people aged 14-19 years having been at risk for acute alcohol-related harm at least once in the prior 12 months (Australian Institute of Health and Welfare [AIHW], (2008).

While excessive alcohol consumption has, for a long time, been seen as a male problem; there has been a gradual shift towards a social acceptance of female drinking which has resulted in a diminishing gap in drinking quantity and style between men and women (Roche & Deehan, 2002). There is substantial evidence that women are at higher risk than men for detrimental physical, medical, social and psychological effects of at-risk alcohol consumption (Epstein, et al., 2007). Research outlining the epidemiology of women's substance use emphasises the need for further examination into influences that may be gender specific and culturally defined (Matheson, 2008; Measham & Ostergaard, 2009). As such, there is a need to utilise female perspectives in examining alcohol consumption and alcohol related problems in order to reflect a more balanced and competent version of drinking in today's culture (Allamani, 2008).

Currently a number of reasons are offered to explain the observed trends including reduction in traditional sanctions and social norms against women drinking, financial emancipation, cultural shift and targeted advertising to name a few. However, there is yet comparatively little research examining drinking by young women in order to understand this 'new' drinking pattern. Most research into alcohol use and subsequent intervention and prevention campaigns have been based on male perceptions and constructs of drinking. While such approaches have provided important information regarding the quantity and frequency of alcohol consumption by women, they do not address the important question of why. To understand the why, research needs to explore the difference between males and females in the meaning of the behaviour and the place that drinking holds to them. As such, the aims of the current project were to:

- Describe young women's experiences in public drinking venues, who is drinking, how they are drinking, their interactions with other females and males, and other behaviours associated with drinking that occur in these venues
- Explore the current culture of drinking by young women aged 18-25 years

- Examine the norms associated with alcohol consumption for young women aged 18-25 years
- Synthesise the information gathered and develop evidence based recommendations for intervention to reduce risky alcohol consumption by young women

In order to achieve these aims, the current project undertook two qualitative data collection studies. Analysis of the data revealed there were three broad topic areas for understanding young women's drinking. They included *Reasons for Drinking; Women's Understanding and Management of Risks; and Prevention and Management of Excessive Intoxication*. Out of these broad topic areas, six recommendations have been made in order to assist in the development and dissemination of strategies to reduce risky alcohol consumption by young women and the impact of associated harms. They include:

RECOMMENDATION 1: It is the recommendation of this report that the safety behaviours young women were found to engage in might be used proactively as part of safety information regarding alcohol consumption.

RECOMMENDATION 2: It is the recommendation of this report that campaigns designed to raise awareness among young women as to issues associated with safe transportation after a period of drinking be developed and disseminated.

RECOMMENDATION 3: It is the recommendation of this report that the alcohol related risk and protective behaviours uncovered in this study that are unique to young women are utilised in school and community based programs. It is recognised and emphasised that such information must be targeted (although not exclusively) at younger cohorts of women (under 18).

RECOMMENDATION 4: It is the recommendation of this report that any campaigns designed to influence young women's drinking take a holistic approach and incorporate both risk and protective strategies.

RECOMMENDATION 5: It is the recommendation of this report that

- Initiatives that emulate the characteristics and best practice approach to intoxication management identified in this research should be endorsed and supported.
- Further investigations into the perception and awareness of current services, such as the Chill out Zone, is conducted.

RECOMMENDATION 6: It is the recommendation of this report that further research be conducted that focuses on the broad and immediate social influences on young women's drinking.

## Background

Alcohol-related mortality and morbidity represents a substantial financial burden to communities across the world. In Australia, conservative estimates place the societal cost (2004-2005) for alcohol abuse at approximately 15.3 billion dollar annually (Collins & Lapsley, 2008). Although a number of long-term harms associated with alcohol consumption have been established, the short term or acute effects<sup>1</sup> of alcohol is increasingly becoming recognised as a significant public health concern (Roche, Watt, McClure, Purdie, & Green, 2001; Stockwell & Hawks, 1996). The National Drug Research Institute (see Chikritzhs et al., 2003) reports that among the half million hospitalisations that were caused by risky and high risk drinking in the eight year period leading up to 2001, the majority (67.8%) were for acute conditions. In Queensland the yearly average (1995/96-2000/01) of hospitalisations caused by acute effects of alcohol has been calculated to over 55,000 (Chikritzhs et al. 2003).

Research has found that adolescence and young adulthood is a peak period for heavy episodic alcohol consumption, with over a third of all people aged 14-19 years having been at risk for acute alcohol-related harm at least once in the prior 12 months (Australian Institute of Health and Welfare [AIHW], (2008). The high number of young people that regularly engage in excessive episodic drinking is reflected in injury statistics, with males and females aged 15-19 years having the highest hospital separation rates<sup>2</sup> for acute alcohol intoxication, followed by men and women aged 20-24 years (Australian Bureau of Statistics [ABS], 2008). Furthermore, excessive alcohol consumption has been identified as a key causal factor in a large proportion of offences attended by police (e.g., Palk, Davey, & Freeman, 2007). For young people in particular, alcohol abuse has been identified as a risk factor for becoming a victim and/or an offender for a range of criminal offences (World Health Organisation [WHO], 2006).

Excessive alcohol consumption for a long time has been seen as a male problem; however a gradual shift towards a social acceptance of female drinking has resulted in a diminishing gap in drinking quantity and style between men and women (Roche & Deehan, 2002). Young Australian men still consume larger quantities of alcohol than their female counterparts, and have higher rates of

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<sup>1</sup> Short term risks associated with alcohol consumption is based on the National Health & Medical Research Council's (NHMRC) Australian Alcohol Guidelines. The NHMRC guidelines advise that 7 or more standard drinks on any single day would be risky for males in the short term, and 5 or more would place females at risk of harm in the short term.

<sup>2</sup> The number of in-patients who leave hospital through discharge, transfer or death.



alcohol-related offending, victimisation and injury. However, some research findings indicates that while men's drinking has stabilised or slightly decreased, women's alcohol consumption and related problems is still increasing (Grucza, Bucholz, Rice, & Bierut, 2008). Data from the ABS show that from 1998-99 to 2005-2006, the hospital separation rates<sup>(2)</sup> increased from 66 to 107 per 100 000 for men while the rates more than doubled for women from 46-99 separations per 100 000 (ABS, 2008). Women are, however, not only at risk of sustaining intentional or unintentional injury, they are also increasingly often implicated as the perpetrators of alcohol-fuelled violence. For example, in a recent investigation of the occurrence and resource impact of alcohol and other drug related incidences on operational policing in Queensland, Palk, Davey and Freeman (2007) found that while the majority of offenders (32.3%) involved in alcohol-related incidents were male, a large portion (26.8%) involved females. Conversely, when victims of incidents involving alcohol and/or drugs was investigated, it was found that the gender of victims tended to be evenly distributed among males and females (males = 49.5% & females = 50.5%). The increasing problem of female intoxicated aggression is further evidenced by research which has found that females are more likely to sustain alcohol-related injuries that are inflicted by other women than by men (Sivarajasingam, Morgan, Shepherd, & Matthews, 2009). These findings are also supported in Australian research (Najman, et al., 2009), which indicates that adolescent girls' aggressive and delinquent behaviour is approaching or equalling that of their male counterparts.

It is also important to note that while young women generally consume lower amounts of alcohol compared to young men, physiological differences in ability to metabolise alcohol render women more sensitive to acute effects of alcohol. The latest available data from the National Drug Strategy Household Survey (Australian Institute of Health and Welfare, 2008) show that a higher proportion of females (28.3%) than males (24.5%) aged 14-19 put themselves at risk of short-term alcohol-related harms at least once a month. Furthermore, women typically present to hospital admissions with injuries at lower levels of alcohol intake (Roche et al., 2001; Stockwell et al., 2002).

Hence there is substantial evidence that women are at higher risk than men for detrimental physical, medical, social and psychological effects of at-risk alcohol consumption (Epstein, et al., 2007). Research outlining the epidemiology of women's substance use emphasise the need for further examination into influences that may be gender specific and culturally defined (Matheson, 2008; Measham & Ostergaard, 2009). There is a need to utilise female perspectives in examining alcohol consumption and alcohol related problems in order to reflect a more balanced and competent version of drinking in today's culture (Allamani, 2008). Critically, many studies indicate that women's drinking behaviour expose them to increased or different levels of risks because of their

gender: such as risky sexual practices, violence, sexual assault and drink spiking (Epstein, et al., 2007; Hutton, McCaul, Santora, & Erbelding, 2008; Matheson, 2008; Taylor, Prichard, & Charlton, 2004; Testa & Livingston, 2009). These gendered patterns of drinking and risks bring about the question of differing reasons or influences behind the drinking behaviours. Whilst one might expect some overlap between culturally influenced reasons that men and women give to their alcohol consumption, variation between the sexes would also be expected. For instance, Mullen, Watson, Swift and Black (2007) found some common factors in young people's drinking behaviour, but also distinct gender differences. However, there is an absence of investigations into the reasons for women's drinking, as well as their perspectives on their alcohol consumption and risk exposure. Roche et al. (2008) purport that cultural influences can determine the way in which people perceive and use alcohol and hence it is important to know and understand these influences as a target for intervention.

### *The Importance of Culture*

It is widely accepted that an individual's behaviour does not result purely from biological function, but rather, is an effect of an integration of an individual within a cultural context. For instance, Bronfenbrenner (1977) argued that humans develop as a result of interactions with five different environmental systems. Whilst there are a multitude of definitions of culture and diverging theoretical frameworks for examining cultural influences on behaviour, there is agreement on its importance in influencing an individual's development and behaviour (Geertz, 1973; Gemignani & Peña, 2007).

Gemignani and Pena (2007) describe culture as a fluctuating organisation of material and social constructions that is locally experienced in the daily life of every person through processes of identification and relationship. Geertz (1973) suggests that culture is a hierarchy of meanings and symbols that contributes to an individual's way of thinking, feeling and believing. As such, it is arguable that culture, then contributes to an individual's interpretation of an experience and guides their action within a context. Geertz promoted the examination of culture in research through ethnography.

The field of cultural studies or cultural psychology contains a variety of ways of operationalising cultural factors. For instance, cultural psychology can be examined from either macro-cultural factors or micro-cultural factors (Ratner, 2008). Macro-cultural factors are more distal social influences that include: social institutions such as government, education facilities; artefacts such as advertisements, clothing, shopping environments; and cultural concepts such as time, privacy and wealth (Ratner, 2008). Micro-cultural factors, on the other hand, are concentrated on the more

intimate direct relationships an individual has with its environment, such as family, community and schooling. Ratner argues that micro-cultural psychology that excludes macro-cultural factors is simplistic and in itself a product of a dominant paradigm influenced by wider cultural notions of research. Hence, Bronfenbrenner's (1977) account that incorporates an interrelationship between the individual, its immediate cultural experiences and recognises broader cultural influences is a comprehensive way of examining cultural factors that impact on women's drinking behaviour.

Additionally, Haukelid (2008) posits that there is no need for one definition of culture, but that different definitions examine culture from different perspectives. Haukelid discusses Geertz's (1973) perspective for a depth of understanding, as well as, a broader more simplistic definition that sees culture as a common set of values, ideas, attitudes and norms that reflect a group of people. The importance of attitudes and peer influences as a predictor of risky behaviour has been demonstrated in the literature, as discussed below (Davey, Davey, & Obst, 2005).

### *Culture and Alcohol Consumption*

Research recognises the importance of culture as a contributing factor to drinking behaviours (Davey, et al., 2005; Leonard & Homish, 2008; Perkins & Craig, 2006). For instance, an extensive review by Roche and colleagues (2008) demonstrated how culture frames young people's perspectives around alcohol consumption and influences drinking behaviour. This review highlighted the socially constructed meanings that young people gave to the way in which they consumed alcohol. Whilst there are a variety of definitions of culture, ranging from broad to specific concepts, the most relevant to this research is in line with Roche and associate's (2008) conceptualisation in that:

- Culture frames people's perspectives through socialisation processes.
- Traditional ideas around alcohol consumption and drinking behaviour have been affected by broader cultural changes.
- Drinking practices are underpinned by socially constructed meanings that are undergoing continual change. Hence, these meanings and practices have changed intergenerationally.
- People are not passive recipients of cultural influence, but, through their interaction with others, are also active shapers of culture.

Studies demonstrate the relationship between changes in women's alcohol consumption (and the feminisation of drinking); and the evolving of women's societal roles (Allamani, 2008; Lindsay, 2006). Yet, much research into women's alcohol use is based on male constructs regarding drinking and therefore may not be relevant to a female culture of drinking. Hence, there is a need for gender-

specific interventions addressing the culture of women's drinking and the associated exposure to harm to provide a more relevant depiction of this emerging phenomenon. Considering the recent findings that demonstrate two high risk age cohorts among Australian women (ABS, 2008; NDSHS, 2007), there is little, if any, research that explores women's drinking from a female only perspective as most research into alcohol use and subsequent intervention and prevention programs have generally been based on male perceptions and constructs of drinking. Studies which have addressed women's drinking often focus on the concept of alcoholism rather than social drinking which is the hallmark characteristic behaviour of the large proportion of young women drinkers entering their career path of adult drinking.

Much literature and research reports sex differences in adolescent drinking patterns. However such an approach, while valid, does not necessarily recognise the difference between the sexes in the meaning of the behaviour and the place that drinking holds in their culture. This leads to an assumption that male and female drinking differs only in terms of consumption patterns, which has lead to the development of prevention and education campaigns that may not necessarily be relevant to a female culture of drinking. This present study does not examine women's alcohol consumption in terms of a statistical comparison to patterns of male consumption. Rather it has been designed to examine only a female sample. This will allow the analysis and the understanding of the behaviour under investigation to develop as free as possible from a mind set of comparison with male behaviour which often detracts from an understanding of specific populations.

### *Women and Alcohol Consumption*

As discussed, research on women's drinking behaviour is limited. In Measham and Ostergaard's (2009) review of young women's 'binge' drinking in a European context, they highlight the need for an analysis of how alcohol consumption is constructed and contextualised in a gendered and classed way. Measham (2002) discusses the socio-cultural context of women and drug use, but not does not specifically analyse alcohol. Women's recreational drug use is set within a larger cultural context that reaffirms both traditional and non-traditional forms of femininity (Measham, 2002). Their substance use behaviours come with an image that conforms to such representations of femininity, such as the 'club babe' who balances being sexually attractive and sexually active, but not sexually promiscuous (Measham, 2002).

A study into young people's 'clubbing' in Melbourne demonstrated that alcohol consumption is an expression and enactment of both class and gender (Lindsay, 2006). This qualitative investigation of the dance club scene showed that drinking venues are becoming more feminised and choice of venue represents a young person's identity in terms of class and femininity. Whilst Measham and

Brain (2005, p. 277) discuss how alcohol consumption in the night-time economy occurs in “socially prescribed ways”, Day (2010) argues that British drinking culture has not become feminised, but rather women drinking in public venues operate within in a class-defined construction of femininity. For example, middle-class women invest in images of femininity to a greater degree than working class women, for whom these images may be somewhat inaccessible as a result of their class. That is, images of femininity and feminine ideals are informed by middle-class values (Day, 2010). Similar findings were depicted in Lindsay’s (2006) study of women in Melbourne night clubs, wherein women in more commercial (middle-class) venues enacted a more emphasised form of femininity.

The societal roles that a woman assumes are influenced by wider cultural norms and can be associated with their drinking patterns (Kubička & Csémy, 2008). For instance, a review by Allamani (2008) examined the changing pattern of women’s alcohol consumption in relation to their shifting societal roles. The review compared two distinct cultures within Italy and concluded that the relationship between women’s roles in contemporary society and their drinking behaviour is a complex one that needs further exploration. Allamani (2008) also argued that each country has its own range of cultures and acculturation processes around gender. Hence, alcohol consumption needs examining from a female perspective in each country to enable valid policymaking and interventions (Allamani, 2008).

### **Purpose of the current project**

The literature reviewed in this report has revealed that while excessive alcohol consumption has, for a long time, been viewed as a male problem; there has been a gradual shift towards a social acceptance of female drinking which has resulted in a diminishing gap in drinking quantity and style between men and women. The reported patterns of women’s drinking behaviour are of concern particularly because of the increased susceptibility of damage to women when compared to men. Currently a number of reasons are offered to explain the observed trends including reduction in traditional sanctions and social norms against women drinking, financial emancipation, cultural shift and targeted advertising to name a few. However, there is yet comparatively little research examining drinking by young women in order to understand this ‘new’ drinking pattern. Most research into alcohol use and subsequent intervention and prevention campaigns have been based on male perceptions and constructs of drinking. While such approaches have provided important information regarding the quantity and frequency of alcohol consumption by women, they do not address the important question of why. To understand the why, research needs to explore the

difference between males and females in the meaning of the behaviour and the place that drinking holds to them. As such, the aims of the current project were to:

- Describe young women's experiences in public drinking venues, who is drinking, how they are drinking, their interactions with other females and males, and other behaviours associated with drinking that occur in these venues
- Explore the current culture of drinking by young women aged 18-25 years
- Examine the norms associated with alcohol consumption for young women aged 18-25 years
- Synthesise the information gathered and develop evidence based recommendations for intervention to reduce risky alcohol consumption by young women

In order to achieve the above aims, an observational study as well as individual and focus group interviews was conducted. Each study is explained in greater detail below.

## Observations: Pilot Study

### *Method*

Through observations of women in natural drinking environments this part of the project sought to examine social and contextual factors of drinking. Observations were chosen as the method of data collection as it facilitates not only the examination of young female drinking behaviours, but also the more subtle interactions between social norms and controls, drinking context and friendship group dynamics and behaviour. Observations were conducted across a variety of settings and context in order to capture the unique influence of different social environments on target behaviours. Sampled locations included:

- Three inner Brisbane city licensed venues
- Various locations around the Fortitude Valley area (Brisbane)
- Eagle Farm Racecourse, Melbourne Cup day (Brisbane)
- Surfers Paradise, during the schoolies celebrations (the Gold Coast)

*Procedure.* Data collection was conducted by a pair of female research officers, who were both involved in the subsequent analysis in order to maintain continuity with the data. After each observational session, notes were compared and the researchers discussed the emerging themes. Any discrepancies were reconciled by reworking, renaming or merging categories. In addition,

researcher team meetings were held to discuss findings as well any problems pertaining to observations or data recording.

*Participants.* Although not limited to, observations focused on women who appeared to be in their mid-twenties or younger. As alcohol consumption levels and patterns largely can be understood in relation to its social context, observations also included men present at the observation sites as well as women who appeared to be outside the targeted age range.

## *Results*

It was anticipated that the observations would inform the researchers about subtle social and contextual factors influencing young female drinking; factors that might not be easily detected through other means of data collection. During data collection, particular attention was given to behaviours that would be considered non-normative in a sober setting as such how norm violations could be conducive to anti-social or offending behaviours. The uncovered themes are presented below.

*Context-specific norms.* As observations were conducted over a wide range of different social context, the researchers were at a position to observe how norms and behaviours varied. It was found that a crowd of people confined to one area (such as a bar or club) or attending the same event (for instance a horse race) displayed similar behaviours in terms for instance of intoxication levels, general rowdiness and boisterousness, tendency to dance, walk around or sit down. The collective behaviour was in much found to be a local phenomenon, to extent that different venues in close vicinity of each other could house vastly different behaviour repertoires among its patrons. The context-specific norms that guided drunken behaviour appeared to be influenced by two factors; the social purpose of the event and the social control imposed on patrons by different regulatory bodies. It appeared that the shared social purpose of the gathering dictated the norms around appropriate drunken behaviour.

Furthermore, a strong and visible presence of security, use of bright lighting and responsible service of alcohol (including free supply of water) was generally related to less overt intoxication and behaviours that deviate from sober norms. In this manner, the social purpose of the event, in conjunction with the social control imposed by management, security staff and police as they applied to the different setting appeared to strongly influence the norms and behaviour of the revellers.

*The high tolerance context.* Other contexts offered less social control or were occupied by individuals who appeared to be sharing a desire to drink larger quantities of alcohol and challenge the boundaries imposed by sobriety. This is an important area that requires much more research. In these settings, a greater tolerance or even celebration of more extreme deviations from sober norms were displayed among patrons. An example of the latter was noted during data collection at the suburban race course, where the researchers witnessed a young woman being escorted from the premises by police. As she was led through a section occupied by young men and women, she received cheers and spontaneous applause from the onlookers. In a sense, negative alcohol related outcomes in these settings were worn as a 'badge of honour'.

*Group dynamics and behaviour.* Young women's drunken behaviour was found to be related to the setting within which they were consuming their alcohol. However, young women's drinking behaviour was also observed to be strongly influenced by their immediate social group. Occasionally groups of young women were observed whose alcohol-related behaviour appeared to be challenging sober norms to a greater extent than the surrounding context. During some observations, this type of behaviours was associated with a celebratory occasion, such as a birthday or a hen's night. Such occasion appeared to allow and excuse more extreme behaviour and/or alcohol consumption, in particular for the young woman being celebrated. More often than not, such groups were easily distinguished through their use of festive hats or other distinctive features (a predominantly female characteristic) . It was also observed that within more tolerant settings, one member of a group of young female friends could display more extreme or provocative behaviours than the group. While her behaviour was not adopted by the other members in her social group, they were often found endorse her behaviour by laughing and/or encouraging her. As such, it appears that the dynamics within a friendship group in interaction with the broader social context could influence individual women's alcohol related behaviour.

*Protective and unsafe behaviours.* Most young women who were observed to display excessive intoxication or emotionally unstable behaviour were attended to by female (most frequently) or male friends. Common protective behaviours were offering water, ensuring that no falls occurred or simply offering comforting and calming support. This type of behaviour was not observed among the young male drinkers and is of interest to the current study. It should be noted that although no overly intoxicated young women was observed alone, one young woman was observed wandering the street while crying on her own. Such instances evoke questions around a potential break down



of group-based protective behaviours which has been shown to be an established pattern recognised within the available literature

As alcohol consumption levels and behaviours were found to be a social activity, the contextual and social factors identified and described in this part of the project will be utilised as the starting point for further examinations of young female protective and unsafe behaviours. Particular attention will be given to the relationships between context, group dynamics and individual behaviours. Furthermore initial findings pertaining to a 'culture of care' among young drinking women will be explored and factors leading up to both successful and unsuccessful group-based protective behaviour will be mapped.

A number of general prompts were posed to elicit information. They included:

- (1) What unsafe and protective behaviours do women engage in while intoxicated?
- (2) Does a culture of care exist within female friendship groups in relation to drinking?
- (3) Can unique risk or protective factors based on context and/or gender be identified?

The themes identified from these prompts are highlighted in the results section.

## Interviews

### *Method*

*Participants.* Recruitment was conducted among female students from a large Queensland University as this cohort was expected to have experiences relevant to the current study's research objectives. Inclusion criteria was age (18-25 years), however no requirements were placed on frequency or level of alcohol consumption to ensure a variety of alcohol related attitudes and behaviours among the sampled women. A total of 40 young women were interviewed (age:  $M = 20.03$ ,  $SD = 1.94$ ,  $Mdn = 19$ ), of which 17 women participated in on-campus focus groups and 23 women were interviewed via telephone.

The majority (94.9%) of women reported having engaged in episodes of heavy drinking<sup>3</sup>, with 20.5 percent doing so less than monthly and 48.7 and 25.6 percent doing so monthly or weekly, respectively. The Alcohol Use Disorders Identification Test (AUDIT) was used to assess risky and high

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<sup>3</sup> Based on the National Health & Medical Research Council's (NHMRC) Australian Alcohol Guidelines, which states that 5 or more standard drinks on any single day would place females at risk of harm in the short term.

risk or hazardous and harmful drinking as well as potential alcohol dependence. Frequencies for each question are presented in Table 1.

Most women reported consuming alcoholic drinks 2 - 4 times a month (45.0%), with 10 percent stating that they drank more than 4 times a week. During the past year, 43.6 percent of the participants reported not being able to stop drinking once they had started and just over half (58.9%) had experienced feelings of guilt and remorse. A further 53.9 percent had failed to do something normally expected of them due to drinking and 53.9 percent had experienced memory blanks. More than half of the sample (59.0%) had injured themselves or someone else while intoxicated, and 12.9 percent had been advised to cut down their drinking.

The AUDIT classifies test-takers alcohol consumption according to risk level, while a separate subscale assesses potential dependency issues. As such participants with potential dependency within each risk classification group can be discerned. As can be seen in Figure 1, the majority of the interviewed women's AUDIT scores classified them as risky or hazardous drinker. A small proportion of women in all risk groups, excluding the low-risk group, scored above the cut-off for potential dependency. In total, these women made up 10 percent of the overall sample.

Table 1. AUDIT, Alcohol Use Disorder Identification Test. Missing values for questions 2 - 10, percentages are calculated based on  $n = 39$ .

AUDIT question	AUDIT Score				
	0	1	2	3	4
<b>Hazardous alcohol use</b>					
1. How often do you have a drink containing alcohol?	Never 2.5%	Monthly or less 20.0%	2-4 times a month 45.0%	2-3 times a week 22.5%	>4 times a week 10.0%
2. How many standard drinks do you have on a typical day when you are drinking?	1 or 2 15.4%	3 or 4 25.6%	5 or 6 41.0%	7-9 10.3%	>10 7.7%
3. How often do you have six or more standard drinks on one occasion?	Never 17.9%	Less than monthly 23.1%	Monthly 46.2%	Weekly 12.8%	Daily or almost daily 0.0%
<b>Dependency symptoms</b>					
4. How often during the last year have you found that you were not able to stop drinking once you had started?	Never 56.4%	Less than monthly 28.2%	Monthly 7.7%	Weekly 7.7%	Daily or almost daily 0.0%
5. How often during the last year have you failed to do what was normally expected of you because of drinking?	Never 46.2%	Less than monthly 43.6%	Monthly 10.3%	Weekly 0.0%	Daily or almost daily 0.0%
6. How often during the last year have you needed a first drink in the morning to get yourself going after a heavy drinking session?	Never 97.4%	Less than monthly 2.6%	Monthly 0.0%	Weekly 0.0%	Daily or almost daily 0.0%
<b>Harmful alcohol use</b>					
7. How often during the last year have you had a feeling of guilt or remorse after drinking?	Never 41.0%	Less than monthly 41.0%	Monthly 12.8%	Weekly 5.1%	Daily or almost daily 0.0%
8. How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never 46.2%	Less than monthly 38.5%	Monthly 15.4%	Weekly 0.0%	Daily or almost daily 0.0%
9. Have you or someone else been injured because of your drinking?	No 41.0%	Yes, but not in the last year 30.8%	Yes, during the last year 28.2%		
10. Has a relative, friend, doctor, or other health care worker been concerned about your drinking or suggested you cut down?	No 87.2%	Yes, but not in the last year 2.6%	Yes, during the last year 10.3%		

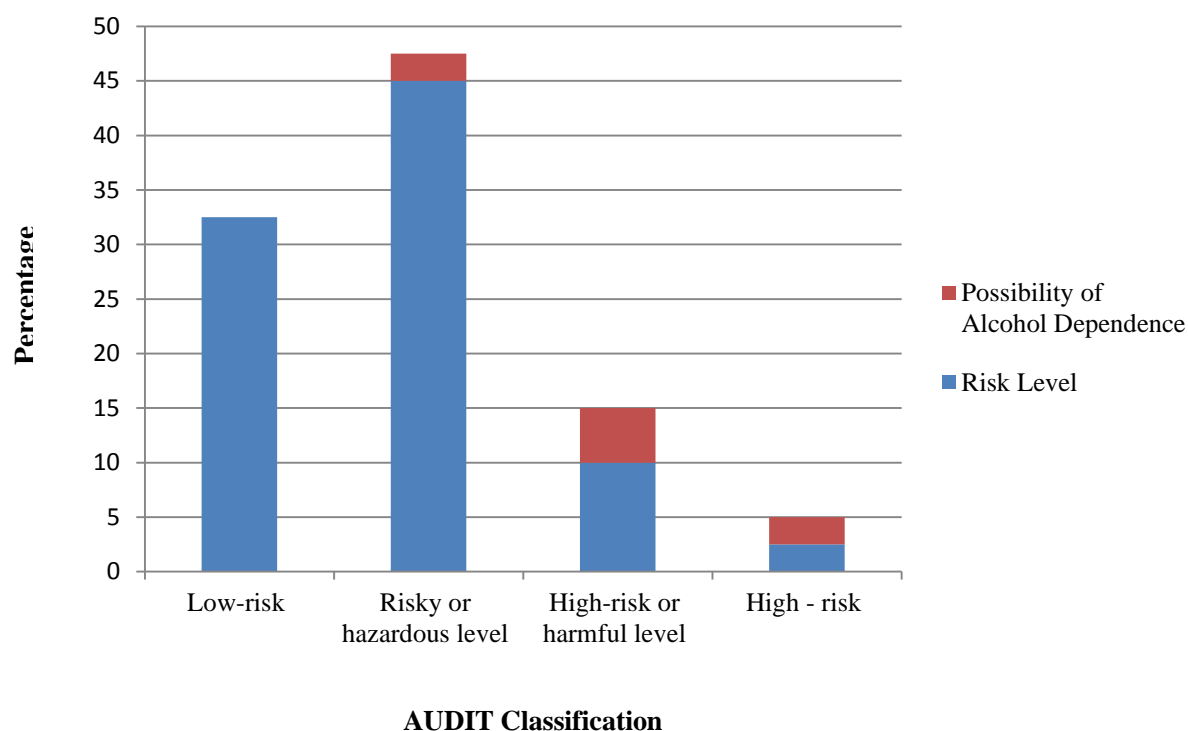


Figure 1. Classification of participants according to risk and potential dependency.

*Materials.* A semi-structured format was used for the focus group and individual interviews. An interview schedule was developed prior to the first interview, covering broad areas of concern. All interest areas were discussed during the interviews however small deviations from the script occurred to pursue interesting or unexpected information given by the participants. Analysis and interviewing were undertaken simultaneously, which allowed for theoretical sampling of the data (Draucker, Martsof, Ross, & Rusk, 2007). As theme categories and relationships emerged from the data, the interview script was modified in order to allow for continuous exploration and confirmation of these themes/relationships. Although evolving, the script retained the main areas of interest.

*Procedure.* A general overview of the topic area and the included questions were given for participants in both the focus groups and the individual interviews. Great emphasis was placed on the value of honest responses. To encourage frank opinions the researcher conducting the interviews ensured the participants that the areas under evaluation (for instance whether police have a role in preventing excessive intoxication among women) were not a reflection of her own ideas or opinions. Furthermore, confidentiality (findings would not be discussed outside the research

team and only be made available in amalgamated form) and anonymity<sup>4</sup> (no responses would be linked to individual participants) were discussed. The focus groups were facilitated by the same researcher that conducted the individual interviews. However, a second research team member was present during the focus group specifically to make note of subtle group interactions. Any such observations were discussed between the two researchers to ensure consensus was reached. Both the focus group and individual interviews were recorded and subsequently transcribed verbatim by a professional transcriber. The interviews continued until saturation was reached (Corbin & Strauss, 2008).

*Data analysis.* To maintain analytic continuity, the transcripts were read and analysed in full by the same researcher that facilitated the interviews and focus group discussions (Fischer, 2006). The data was subjected to a thematic analysis which uncovered and categorised common themes in the interview transcript. A constant comparison method (coding, categorising, synthesising and interpreting data) was used during analysis (Corbin & Strauss, 2008). The smallest units of text containing relevant information was identified and coded. Based on common elements, these codes were assigned to different categories. If relevant to more than one category, the same code could be assigned to multiple categories. Using a bottom up method category properties were derived from its codes. These properties subsequently provided the basis for category inclusion criteria (Fischer, 2006). Category property and inclusion criteria was constantly reevaluated and modified to ensure they adequately represented all included codes. This process included deviant case analysis (Silverman, 2005), which entails analysing and incorporating 'contradictory' statements within the emerging conceptualisation of the data. To ensure reliability and validity, themes, codes and categories were discussed within the research team as they emerged.

## *Results*

Analysis of the interview data is presented under the tree following broad topic areas: *Reasons for Drinking; Women's Understanding and Management of Risks; and Prevention and Management of Excessive Intoxication.*

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<sup>4</sup> Participants taking part in the focus group were given name tags with an identification code which they were instructed to identify themselves with when before speaking. The identification code was also used when participants referred to each other during discussions to avoid the use of personal names.

### *Reasons for Drinking*

Factors influencing the interviewed women's drinking prevalence and quantity were examined, revealing four clusters of underlying categories; inexperience, alcohol related expectations and motivations, practical barriers and social influences. The first category, inexperience, related to accidental intoxication that commonly was excessive in nature. Most often intoxication thorough inexperience occurred before the women had gained some experience and understanding of the intoxicating effects of alcohol. The women also spoke of alcohol related expectations and individual motivations for their choice to drink. Consuming alcohol, sometimes excessively, was associated with having fun, relaxing and escaping responsibilities associated with everyday life. Although the women spoke of these reasons as individually motivated, it should be noted that these alcohol related expectancies are defined within the larger culture. In addition a few women spoke of drinking as a form of rebellion. One woman described how she had used alcohol in this context to examine "how far I could go with it" (Participant 7). Negative emotional states had also at times motivated a few of the interviewed women's drinking. Drinking to block out negative emotions tended to be excessive and "out of control" (Participant 5) and the women had engaged in such drinking agreed that it was ill-advised. Practical barriers to drinking were cited by some of the interviewed women as influencing their choice to drink. Barriers included health concern ("[...] if I'm tired or sick, yeah or health concerns." Participant 9), work or study related commitments, financial restraints or being assigned the role of designated driver. Furthermore the women reported the supply of inexpensive or free of charge alcohol influence their tendency to drink. Open bars or bar tabs for instance tended to increase the women's alcohol consumption.

As noted above, broader cultural influences shaped the young women's understanding and expectancies around alcohol. In addition, the immediate as well as broader social context influenced the women's consumption prevalence, levels and related behaviour. Most notably, such influences were manifested when large groups of people with similar goals, behaviours and attitudes toward alcohol consumption were gathered. Examples of such gatherings were music festivals and horse races, but also "*certain clubs and stuff as well*" (Participant 9). The two underlying and intertwined factors present for all these events or places were the common expectations and mindset of the people attending them. For instance;

*"Yeah everyone is there to feel a bit different I think. To have a good time and yeah, it does create that kind of environment." (Participant 10)*

Events such as these gave the women a purpose, or an excuse, to drink and attending them most often involved a planned decision to drink heavily;

*“...like people come already with the thoughts to think that they’re already going to drink a lot.”(Participant 16)*

Other celebratory occasions such as schoolies, twenty-firsts, birthdays and hens nights as well as days of cultural significance such as Anzac, Australia, Labour or St Patricks Day further gave the women an excuse to drink and brought them together under a shared purpose and similar state of mind. Some of these occasions (particularly birthdays) were often contained within a friendship group and as such could be limited to a handful of people. Despite the limited number of people involved the mindset was often the same as during large events which distinguishing the celebratory occasions from ‘ordinary’ drinking sessions;

*As soon as you put the word ‘celebrate’ there, let’s head out, let’s have a good time, let’s head out for a few drinks, it’s a different situation I guess.*

Special events, places or occasion created alternative alcohol related norms which allowed the women to some extent to avoid the social stigma normally attached to public and excessive intoxication. One example;

*“I agree with [Participant identification code]...not that I'm horrendously judgemental but when you see staggering women with all the bridesmaids, and you sort of like yeah....good stuff. But just someone else staggering and wandering up they’re like mmmmm had a little bit too much.” (Unidentified Participant<sup>5</sup>)*

The use of props as to mark a special occasion and the associated excuse to consume large quantities of alcohol had previously been observed during the pilot study. The women reported more extreme drinking behaviour during the above described instances. Two examples;

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<sup>5</sup> Participants in focus groups who omitted to state their identification code before speaking will be referred to as ‘Unidentified Participant’

*"Yes definitely, definitely. I would drink a lot more on a night like that. I'd drink a lot more quicker, often as well. Not try to pace myself and have water in between."*  
(Participant 10)

*"[...] you get really, really drunk and you don't remember the next day and might not stop like partying or whatever until like the next day and maybe do like an all nighter."*  
(Participant 16)

Although a few appeared unaffected, some of the women reported how the alternative norms that governed special occasions, events or places made them feel pressured to drink. This pressure could originate from within as participants felt uncomfortable or left out as there were not *"on the same wave length"* (Participant 9) as their peers. It could also originate from their friends, with some women reporting how their choice to not drink appeared to bother them;

*"Probably ...I don't know like people find the point of going out, like out out, like you know you drink. So if you don't even have a drink they sort of find it, like it sorts of defeats the purpose of going out. I personally don't think that but I know that people have told me to drink sometimes when I've gone out because they just, it sort of yeah...confuses them. [...] yeah like someone once bought me a drink so that I'd drink"*  
(Participant 14)

### ***Women's Understanding and Management of Risks***

Analysis revealed that the interviewed women believed drinking until excessively intoxicated was associated with a certain level of risk. As a response, different types of safety behaviours were employed in order to eliminate or mitigate these risks. This section gives an overview of alcohol related risk as understood by young women and corresponding safety behaviours. Last, a description and analysis of instances under which safety behaviour failed to be implemented is presented.

***Risks Associated with Heavy Intoxication.*** The women in the interviewed sample were exclusively concerned with the short-term risk of alcohol use (e.g. social embarrassment, injury or assault). Some women appeared to perceive the dangers associated with excessive intoxication to be very high using words such as *"scary"* (Participant 1) and *"terrifying"* (Participant 30) when talking about risk associated with their personal alcohol use. Although other participants demonstrated less concern with alcohol-related harms, all women agreed that drinking to excess was associated with a



degree of danger to oneself. Analysis revealed that perceived risks associated with heavy consumption could be described as either specific to the environments that the young women often visited while intoxicated or as resulting from their own impaired judgement, risk perception and/or motor control.

*Environmental threats.* A large majority of the sampled women expressed concern regarding what was often termed “other drunk people” (Participant 30) when describing the risks associated with intoxication. Particularly, the women were wary of potential hostility, aggression and sexual violence. While the threat of sexual violence was associated with males, the risk of unprovoked physical attack was often linked to other women. Participant 26 spoke of an incident when she had accidentally bumped into a female patron in a bar setting;

*“I was like oh God it was the look she gave me. It was like she was ready to kill me just because I’d bumped her.”*

‘Other drunk people’ were seen as the main external threat. However intoxicated others did not always evoke apprehension among the interviewed women. Closer examination revealed that three separate characteristics determined whether a person would be regarded as a potential threat. First, as implied, the person must be unknown, precluding the ability to predict the influence of alcohol on their tendency to express hostility or aggression. An example can be found in Participant 15 recollection of an incident which she felt could have ended badly.

*[...] when we got there, there was like a few guys and they’d all been drinking so I mean that probably could have led to a pretty dangerous situation. Like me and my friends getting into a car full of guys that I didn’t know, I was a little bit tipsy like, they were all drunk so it could have ended really badly. Thankfully it didn’t, like they were harmless, but looking back to it now it’s like yeah that’s probably not the smartest thing to do at the time.”*

As evidenced by the above quote, intoxication was further seen as a factor contributing to the perception of unknown individuals as a potentially dangerous. Two further examples are given below.

*"[...] there's that level of violence sometimes of people who have had too much."  
(Participant 2)*

*"[...] I don't particularly feel safe or comfortable if there's a lot of people that I can see are very drunk. Because I just never know how the evening will sort of pan out and then I find I'm worrying all evening if someone I'm with might bump into someone and they are particularly aggressive." (Participant 4)*

However unknown and intoxicated others were not automatically perceived as a potential threat. Rather, the surrounding environment in which the unknown others were present was found to determine whether or not they were perceived as potentially dangerous. In line with observations made during the initial pilot study, environments appeared to create expectations of what is acceptable or appropriate. For instance;

*"Whereas you can be really, really drunk at say the [name of licensed venue] and yeah and I don't know throw up on the floor for instance and they're not going to do anything about it, they won't care." (Participant 38)*

It was in certain high tolerance environments that young women felt most concerned about the presence of unknown other. The Fortitude Valley was often referred to as such an environment. Two examples;

*"I think a lot of people in the Valley go to fight and get absolutely smashed."*

*"I agree and I think that too the calibre of people in the Valley is different. Like in the city there's a lot of business people, there's a lot of...I wouldn't say responsible as opposed to I don't know whoever else and it doesn't feel quite so scary."(Participant 36)*

Physical characteristics of high tolerance environments included poor lighting, crowdedness, worn or soiled decor, unclean and malodorous segments and a relative lack of social controls such as police or security personnel.

A further risk associated with commonly frequented drinking environments related to the availability of safe transport, specifically in relation to the journey back home after a night out. Public transport was for the most part considered unsafe, with several factors influenced this perception. Often the young women were forced to travel alone or in the company of one friend which precluded the safety in numbers that was offered by the friendship group. Other passengers were often considered as 'unknown others' and therefore viewed as a potential threat;

*"Especially like if you have to catch public transport home in the early hours of the morning, like it's not very safe. You know usually people go home at that time because they're too drunk to continue and it's just not very safe like on a train." (Participant 36)*

Furthermore, the lack or limited number of security staff available on public transport enhanced the perception of risk. As an alternative to public transport, taxi services were generally considered a safer option, however some concerns were raised;

*"And just...on ..in a cab on your own as a female, catching it home. [...] just having to be in a cab at like 2am in the morning with just the...because you hear all those stories like...not...yeah." (Participant 38)*

*"So you're worried about the things you hear happening to people?" (Researcher)*

*"Oh I have a friend who has also had a problem with like a taxi driver before so just...yeah." (Participant 38)*

Moreover, as the majority of the participants were low income earners, the use of taxi services were not always considered a feasible form of transport. In addition, the services were not always available and at times would refuse to transport heavily intoxicated individuals. The following extract from a focus group interview demonstrates this point;

*"It's not always possible." (Participant 35)*

*"Yeah." (Participant 37)*

*"If you throw up you have to pay a lot." (Participant 35)*

*"Taxi drivers refuse to..." (Unidentified Participant)*

*"If you've been throwing up." (Unidentified Participant)*

For some women, the difficulties and risks associated with transiting late at night or during the early morning hours motivated a friendship group member to take on the role of designated driver, ensuring safe transport for all group members. However, a few women spoke of the problems that were inflicted on safe transport by current traffic regulations restricting the number of passengers under the age of 21 that P1 drivers are allowed to carry between the hours of 11pm and 5am. Two examples;

*"And it's like well I have three friends that are like absolutely smashed, like who do I choose to take home? And umm like I think, I understand like the ruling of it but I mean if you're responsible and you haven't had anything to drink like what's to say you can't drive three of your friends that are just sick and like just want to go home? Like why can't you just drive those three home." (Participant 31)*

*"I've been out in the Valley before and like three of my friends, there was four of us in total and one of us was really, really drunk and sick and she was driven home by a P plater and the rest of us had to get on the train. Like two girls on a train, it was so scary. Because we were all going to go as a four. But you know that's safer in numbers but it ends up being two of us on a train, two girls on our own. We were terrified it was horrible. And we got off at Goodna which is like Bogan central. Oh my God we're going to get raped in a minute." (Participant 30)*

*Vulnerability associated with intoxication.* The women perceived themselves as vulnerable when heavily intoxicated. Poor motor control could lead to falls and injuries and impaired judgement to the engagement in behaviours that were either risky or socially unacceptable. For instance;

*"You're more inclined to do things you wouldn't normally do like drug taking as well. (Participant 2)"*

Risks were more likely to be minimised or trivialised when under the influence of alcohol;

*"Yeah like if you're really intoxicated of course you're going to be less inclined to worry about those things. You're more worried about partying or your next drink." (Participant 2)*

Furthermore, women also felt that intoxication led them to be less apt at identifying and warding off potential aggressive acts or sexual assault from unknown others.

*“And especially ...if woman get drunk it can always put them in a vulnerable position. Either to get raped or being taken away or kidnapped or anything. You never know what happened when you’re not in a conscious state of mind.” (Participant 34)*

*Management of risks (safety strategies).* In order to offset some of the risks associated with intoxication (either from intoxication related vulnerability or from threats present in the drinking environment), the majority of young women reported engaging in a wide range of safety behaviours. Often, such behaviours were planned in advance and involved the friendship group with which the young women consumed alcohol. Among the sampled women only one participant (2.5% of the sample), reported not engaging in well considered safety behaviours while intoxicated. Upon further analysis it was revealed that safety behaviours fell under three categories two of which addressed the women’s vulnerability resulting from heavy intoxication and one that sought to control environmental threats.

*Intoxication management.* This cluster of behaviours was aimed at decreasing vulnerability by limiting intoxication levels. The option to limit intoxication was not preferred by all women and was in some instances only employed if other risk management strategies were unavailable. The tendency to limit intake was more often associated with older age groups. For instance;

*“I think I’ve realised that when I was younger I used to lose control a bit of the situation now I realise you can still have fun not drinking to that extent and be in control.” (Participant 7)*

A few different strategies were employed by the interviewed women in order to manage their intoxication. The women described limiting the amount of alcohol consumed, either by mixing alcoholic drinks with water, keeping track of the number of drinks and setting an acceptable upper limit of drinks to be consumed during one night. Most commonly however, the young women reported monitoring their own intoxication levels and to “*know when to stop*” (Participant 18). Consuming sustenance or water was further used by a small group of women in order to dilute the effect of the consumed alcohol.

*The friendship group.* The peer group which formed the basis for the women's drinking experiences were found to be central to the participant's safety behaviours within what can be described as a culture of helping. The potency of the friendship was found to offer members protection against environmental threats as well as to mitigate the risks associated with intoxication. Protection against attack from unknown others were offered by what was referred to as "*safety in numbers*" (Participant 11), where participants reported feeling protected from attack by unknown others if they were in the company of two or more friends. In terms of vulnerability, a heavily intoxicated group member was often supervised by less inebriated group members to ensure their safety and manage any behaviour that were deemed out of character. In this manner, the women often described a sense of safety derived from the knowledge that they would be taken care of by their friendship group should they need it. For instance;

*[...] to know that if I'm in a situation that's, you know not ideal that they're going to be there to help me." (Participant 15)*

The process through which the friendship group helped to mitigate intoxication-related vulnerability was analysed revealing three categories of behaviour. Commonly, the women described giving or receiving suggestions from other group members to slow down the rate of alcohol consumption. At times such advice was coupled with the removal of alcoholic drinks or by way of substituting drinks of alcohol for water. The participant also spoke of giving particular attention to the monitoring and care of those group members that were most vulnerable.

*"[...] I guess some of my friends are more likely to run into problems than others so I guess if you have a friend like that you make sure you know where they are. Maybe even if you didn't know where everyone is. Or if you can see that one person is really drunker than everybody else kind of hone in on them." (Participant 36)*

A few of the young women appeared to play a particular role in the friendship group in relation to the safe keeping of the group. They identified themselves as the '*mother of the group*' (Participant 13), and described themselves as the group member who remained in control and ensured the group stayed safe and intact. One woman describes her role as follows;

*"I am very mother duck when I go out. It's brutal. So when we go out with the girls I can be as drunk as I like but as soon as they start talking with blokes and then blokes are*

*buying them drinks it's a big thing about going to the bar with the blokes you know."*  
(Participant 35)

Reasons for assuming the role of the group's 'mother duck' varied and included being the only member who did not regularly drink, being anxious and uncomfortable around crowds of intoxicated people or general 'motherly' or leadership instincts. One woman spoke of a previously implemented scheme where designated drivers were given a wrist band and received free soft drink from visited venues during the night out. This scheme had facilitated the 'mother of the group' process where the designated driver had assumed the responsibility for the safety of the group beyond simply providing safe transport. Furthermore, the interviewed woman reported that wearing the wrist band had been associated with a '*certain status*' (Participant 31).

The practice of monitoring and modifying other group member's intoxication and related behaviour appeared to be a well established and accepted practice among the sample of young women in the current study. Although some noteworthy exceptions were found, the participants reported generally being responsive to suggestions or directions given by other group members. As such, the friendship group was found to be an influential and critical aspect of young female safety. However, as will be discussed shortly such group dynamics were found to break down at times. Furthermore, some groups appeared to lack a distinct 'culture of helping' manifested by the tendency to encourage rather than manage extreme behaviours.

Given the important role of the friendship group in minimising alcohol related vulnerability and protect against assault from unknown others, staying with or in contact with the group was identified as one of the most important safety strategies by the interviewed women. Communication and being "*aware of where everyone is*" (Participant 27) was the most commonly used strategy to ensure that no-one was separated from the group. The women frequently reported using mobile telephones in order to stay in touch with group member or locate those who had gone missing. Moreover, one participant reported the use of an agreed meeting point should the group split up. A strategy reported by a few of the participants was to identify one group member within a larger group of friends with whom they always remained regardless of whether the larger group split up. One example;

*“You try and stay in pairs at least so that even if you do separate that happens you know quite often that people want to go and check out different places and stuff like that.”(Participant 39).*

Some women reported having what might be considered a back up plan to fall back on should they be separated from the group. One woman spoke of hiding money specially set aside to pay for a taxi should she be in need of one. Being familiar with the area and knowing how to get home were other examples of such back up plans;

*“And always plan your way of how you’re getting home so you’re not just stranded. So like know where the buses are and when they come and stuff or if you’re going to catch a taxi.” (Participant 6)*

*Management of environmental threats.* Attempts were also made to reduce the threats that originated in the environment. Particularly unknown males in licensed venues were viewed with a degree of trepidation by most of the interviewed women. It was considered unsafe to go home or otherwise leave the group with an unfamiliar man and the women often spoke of the importance of ensuring that their drinks were not spiked. As noted above, intoxicated and unfamiliar people in general were a source for concern to the young women. Correspondingly, the participants often spoke of monitoring the surrounding crowd for any disturbances that might lead to violent or otherwise unpleasant altercations.

*“Oh yeah just watching out for other people’s behaviours like people you don’t know around you. Making sure you know if you can see trouble starting to brew maybe you leave and go somewhere else or you know you take yourself out of that situation so you’re not near them if anything blows up.” (Participant 23)*

It was acknowledged that intoxication often resulted in volatile and sometimes aggressive emotional states. Some young women spoke of the importance of being wary of this fact and that relatively small transgressions could trigger a hostile response. One example;

*“[...] so I suppose alcohol brings out that...emotions that you wouldn’t usually have and that could include violence I guess. Like even, like [participant identification code] was saying earlier if you bump into someone just say sorry.” (Participant 26)*



Misunderstandings and communication difficulties (e.g., due to loud music) could make it difficult to manage hostile situations. As evidenced by the above quote, the importance of apologising to diffuse a situation was recognised by these women. Given communication difficulties it was important that such diffusion occurred swiftly to preclude escalation.

*"[...] if it's not handled like, if it's not nipped in the bud right away, people aren't like oh sorry, sorry then it can really get out of hand [...]." (Participant 4)*

However, it was not only recognised that alcohol could bring out negative emotions in others with a few women speaking of how alcohol had had the same effect on them. This following quote is from a woman who warns against effect of alcohol and states that emotional self awareness is important in order to prevent alcohol related problems.

*"I think you need to be aware of your own emotional state before you start drinking because obviously you know alcohol is like a depressant and so if you're not exactly in the happiest place you know your emotions could definitely change and escalate and you could you know sort of retaliate." (Participant 25)*

The perception of risk and how well it is managed was found to influence the quantity of alcohol that was consumed. Some participants reported that they tended to drink to a greater extent if conditions favoured low environmental threat and if the friendships group were able to adequately provide assistance and minimise alcohol induced vulnerability. Such instances often presented themselves at private parties. Generally, participants did not view other revellers present at such occasions with the same caution as the 'unknown others' encountered in bars and clubs. Despite the fact that other party revellers tended to be intoxicated they were most often known by someone attending the party and thus were not 'unknown' and as such not seen as a potential threat.

*"I think it's... people see it as more acceptable to drink at home or in a friend's house or with someone that you know rather than when you've been out and you're with people you don't know in a public situation where there's lots of things that can go wrong." (Participant 33)*

As referred to in this quote, the friendship group is present during private parties, and further more the likelihood of being separated from the group is small. Attending private parties often precluded the need to transit, which further increased the perception of safety;

*Because I like feel generally just heaps safer if we're having a party at a friend's house...nobody...especially if everybody is staying there the night too and nobody has to go anywhere or leave there and everybody is just there having a good time.*

Finally, it is interesting to note how the participant refers to the revellers present at the party as focused on “having a good time”, which indicates that the social acceptance of anti-social behaviours is relatively low at these events which resulted in increased perceptions of safety. As such, the fact that the social acceptance of anti social behaviour was low, that others present were not complete strangers and that no transit was required increased the perception of the environment as safe. Furthermore, the risk that the friendship group would be split up was small which meant that the group members would receive assistance should they need it. As a result the interviewed women did not feel that their intoxication needed to be managed in the same extent as if they were in a non-domestic setting. Neither did they feel that they needed to engage in strategies such as monitoring the surrounding crowd and being aware of volatile emotions to manage environmental threats.

*Safety strategy breakdown.* Analysis of participant's safety behaviours revealed the friendship group to be the focal point of women's safety while intoxicated. However, the participants related several instances where the group processes by which safety was ensured were rendered ineffective. One problem related to the refusal of a heavily intoxicated group member to accept the supervision or instructions given by less intoxicated members.

*“Yeah so like the whole plans fall apart when people get really drunk. Like if your friends get really drunk they start running off and you're like where did they go? Like (?) one of my friends she broke up with a work mate and she got really drunk and so she was just running all over the place and we were all trying to run after her trying to like you know...” (Participant 24)*

However, intoxication did not appear to be the sole reason for non-compliance among group member, with most women reporting that they would follow instructions by other group members

despite high levels of inebriation; in fact, intoxication and subsequent feeling of vulnerability often motivated women to stay with the friendship group and accept any assistance offered. As seen in the above quote, strong negative emotions sometimes interfered with a group member's tendency to consent to safety behaviours imposed by the group. Individual differences in risk perception and attitudes towards alcohol were also identified as reasons behind disparate reactions towards the necessity of group based safety behaviours;

*"But it definitely comes down to the individual and how much they prioritise their own safety and also respect towards other people that they're with." (Participant 9)*

Age and maturity was further thought to influence behaviours and the tendency to comply with group-based safety routines;

*"And it depends on their ages as well. Like if they're experienced or if they're like just going out for the first time or that sort of stuff." (Participant 32)*

Refusal to accept group based assistance was however not the only issue identified in the analysis of the data. At times intoxication could interfere with group members' ability to supervise or offer assistance. The following quote is given by Participant 35 who earlier in the discussion identified herself as the 'mother duck' of her friendship group.

*"I guess it also depends on how much I've had to drink as well. I mean I really can't put it all on my friends, if I'm blind rotten drunk you know I'm going to be less likely to be able to look after my girlfriends than if I'm you know sober."*

Although mentioned relatively rarely, some of the interviewed women spoke of certain friendship groups that lacked a distinct culture of helping.

*"It was sort of like... I don't know, it was like the first night I sort of joined a new group and it was sort of like a tradition that they had that everyone had to do shots and the more I drank the bigger the shots became." (Participant 14)*

[...]

*“Do you think that there was anything during that night that could have prevented you from getting to that point?” (Researcher)*

*“Yeah probably my friends saying that it was getting too much and because of at the time I was completely out of it so I wouldn’t have known what I was doing but my friends around me knew and they could have very easily not influenced me to drink any more.” (Participant 14)*

Another example of group norms that appeared to encourage extreme behaviour was noted in a ‘drunken escapade’ related by one of the young women (Participant 29). Interestingly, the young woman in question shared this story with her fellow focus group participants before the discussion had formally begun. She spoke of an incident where she and her friends had been trying to evade the police by foot and one of her friends had fallen over and sustained injury to her face. She concluded by remarking that it had been ‘very funny’ to watch. It would appear that this woman viewed incidents such as this with the same ‘badge of honour’ mentality that was observed during the initial pilot study. It was the distinct impression of both researchers present that she wanted to impress the other participants with her story.

However, the importance safety enhancing group dynamics appears to be well understood by participants, and many actively sought to avoid groups that would not offer it, stating that they would only allow themselves to become heavily intoxicated around people they knew they could trust. Due to the vulnerable state the young women found themselves in and the reliance on the group for safety when heavily intoxicated, it seemed that trust among group members was an important factor.

*“I think that it depends on the group of people that you’re with. Like you have to make sure that you can trust them not to just off and leave you or you know go off with some guy that they meet or something like that. You just have to make sure that you can rely on them too, you know to sort of look after you as well.” (Participant 25)*

Reasons for drinking, risks associated with alcohol consumption as well as safety behaviour was collated into a comprehensive model of risk and protective factors influencing the prevalence of negative alcohol related outcomes (Figure 2). The identified factors will be further addressed in the overall discussion of this report.

## Risk factors

## Protective factors

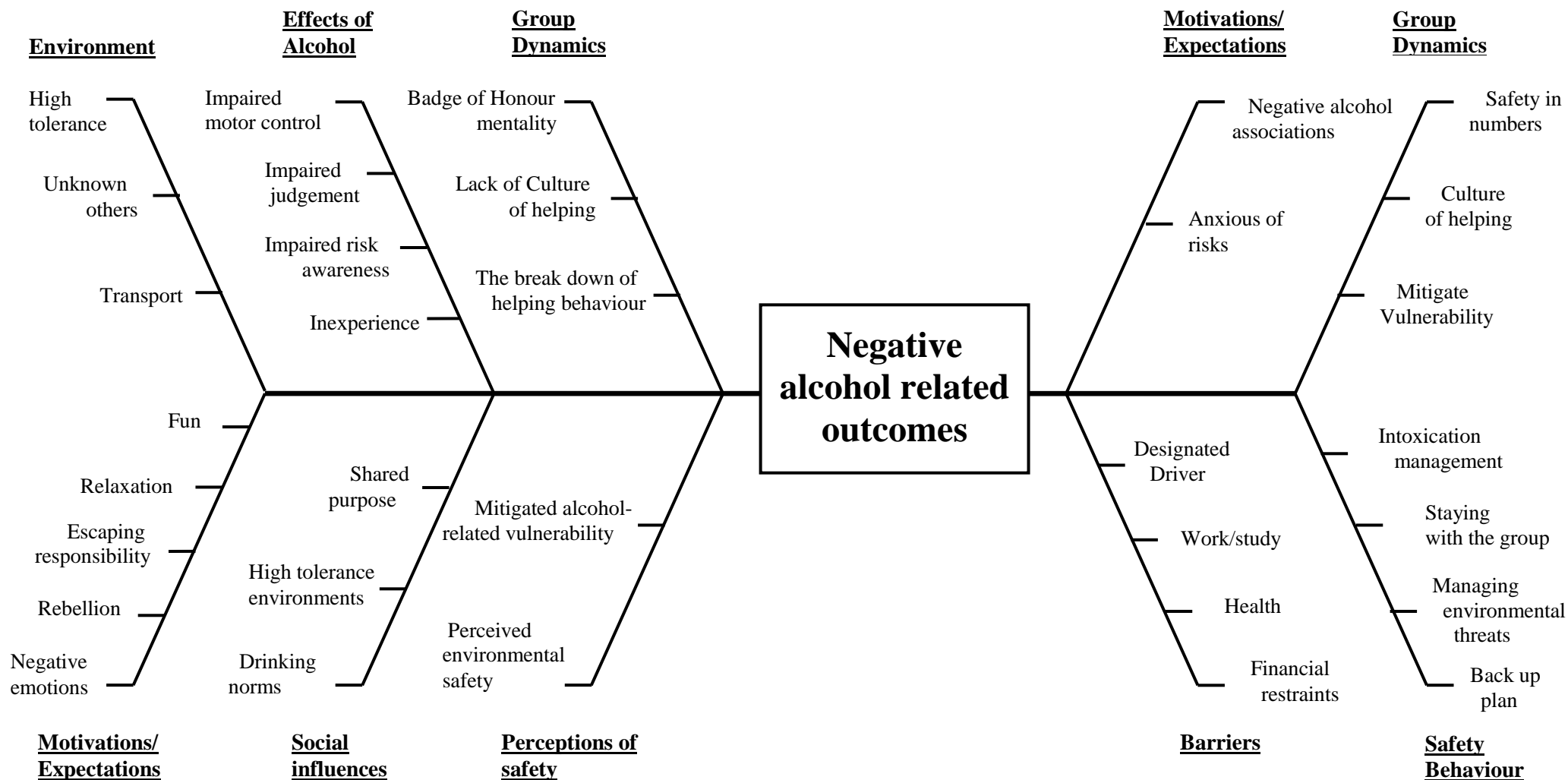


Figure 2. Key risk and protective factors

## *Prevention and Management of Excessive Intoxication*

This section will explore different approaches to the prevention and management of excessive intoxication among young women.

*Information.* The notion of broad acceptance of safety measures among young women was supported by the attitudes expressed by young women regarding information campaigns with some participant suggesting it without being prompted. The majority of participants were positive towards the idea of formal alcohol awareness raising with a number of participants indicating that they had not been sufficiently informed regarding the use of alcohol during their school years. One example;

*“Yeah definitely especially with like in high school about ways of staying safe because I feel like there’s not enough about that.” (Participant 16)*

A focus on safety and an understanding of the risks associated with intoxication was often suggested as an effective approach. As previously discussed, young women were disinclined to modify alcohol intake as a form of safety precaution, instead focusing on reducing intoxication induced vulnerability by relying on the friendship group or controlling for environmental threats. Thus, it was generally held among the interviewed women that while information programs might increase risk awareness and management it would most likely not change their tendency to engage in heavy alcohol consumption. Two examples;

*“Yeah well we had those sort of things at our school and it didn’t really...like you know about it so they showed us the effects of alcohol. So you know what happens but it doesn’t, it probably doesn’t stop you at all. Like yeah it is interesting to know and it also helps people in a situation, they can remember what was taught. But it doesn’t really stop people from drinking.” (Participant 14)*

*“Yeah I do believe it would be [effective]. Yeah because at least like they know then how to be safe even though they’re probably, they’re going to drink anyway. At least they’re like, know safety aspects about the night and that.” (Participant 7)*

It was also often expressed that information and awareness campaigns should be targeted at younger ages to match or precede the first experiences with alcohol as the women interviewed

expressed that their exposure to alcohol came about at an age earlier than the legal drinking age in Australia.

*“But when you’re a lot younger and you first start going out you don’t really realise how much you should drink. So I guess education there.” (Participant 22)*

While opinions varied, a large portion of the interviewed women believed that people such as parents or teachers were the appropriate persons to deliver alcohol related information as they held a certain level of trust. Moreover, several women believed that alcohol information should be delivered by persons close to their own age or life situation to whom they could relate. For instance;

*“...like someone who’s had a bad experience and they can like relate and tell others about that situation that when they’ve had too much to drink. Like someone who has had the same situation.” (Participant 21)*

Therefore, there was an identified need for ‘correct’ information regarding alcohol to be made available within the community setting.

*The management of incapacitated young women.* Participants were asked to discuss what type of assistance they believed they would require if they should become incapacitated due to excessive alcohol consumption. It was found that, overall, the women interviewed held a level of trust toward the police and although they admitted to feeling vulnerable whilst intoxicated, they could trust police to assist them if necessary. For example, it was commonly suggested that efforts to contact the friendship group should be made, which was a strategy the women felt police could assist with. For instance;

*“Yeah have them(the police) call someone who...just call someone for you. (Participant 39)”*

*“ (have the police) take your phone out of your pocket and find you know the last called number and call that number you know. I think it just depends on how drunk you are I guess.” (Unidentified Participant)*

A second common suggestion given by participants was ensuring that a safe means of transport home was provided. To go home was by many of the interviewed women seen as the safest option should they found themselves excessively intoxicated and separated from their friendship group. Some women believed providing transport home was a strategy police could be help with.

*“I think they should, police should have more of a role in helping people get home because I think it’s so common for girls to be you know really, really drunk and vomiting in gutters and stuff, you see it and keep going like....and it’s not always...like it’s a good idea to send them home in a cab, but it’s not always the safest thing to do.” (Participant 37)*

If not possible to locate the friendship group, participants often spoke of the need to receive support similar to what would normally be given within the friendship group. That is, it was felt that an intoxicated and incapable woman needed to be protected against unknown others (protection normally afforded from the safety in numbers found in the friendship group) and to have her alcohol consumption and intoxication monitored and managed. It was also felt necessary that the woman in question was protected from injury and that any behaviour on her behalf that was deemed out of character was managed.

*Willingness to accept help.* It was further attempted to discern the factors that would increase young women’s willingness to accept offered assistance as well as increase their willingness to seek it. It was found that the tendency to accept assistance was closely linked to helper characteristics and ability to help. Often such aspects closely resembled those associated with the friendship group, and the majority of participants felt that volunteer organisations working to help manage the adverse effects of excessive intoxication among young people often fulfilled these criterion. During the discussions pertaining to helper characteristics, several participants spoke of previous contact with or knowledge of volunteer organisations present during their schoolies celebrations<sup>6</sup>. Many of the positive attitudes held by the young women towards volunteer organisations were based on these experiences.

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<sup>6</sup> The women referred to and spoke about the ‘Red Frogs’, a Chaplaincy Network program present in Australia and internationally with the aim guide and assist young people. The organisation work to connect adolescents and young adults with safe and supportive environments and to offer ‘safe yet fun’ lifestyle alternatives. More information is available at: <http://www.redfrogs.com.au/universities/>



Helper characteristics were important both at the individual and the organisational level. The first characteristic of importance related to trust and the ability to handle any adverse situations related to alcohol consumption. For instance;

*"[...] you know that they're safe people because obviously you know they wouldn't just hire someone that's going to cause trouble. So when like you know if you're with someone like that they'd know, well firstly they're sober and also that they'd know sort of what to do and how to help you and you just feel a little bit safer that you're in good hands." (Participant 14)*

*Yes and you just know that because they're volunteers, you know that's what they're there for. They haven't been drinking themselves. You wouldn't, I don't think anyone would think twice about going up to them and saying oh there's a girl around the corner, she's had a bit too much to drink and she might need help. There wouldn't be any trust issues there. (Participant 4)*

In order for an organisation to be considered trustworthy it was felt young people needed to be aware of its existence, location and underlying philosophy and goal. In essence, helping organisations needed to have a good reputation and should not be *"uncool to be seen with"* (Participant 30). A few participants underpinned that in order for volunteer services to be successful these characteristics must be advertised among young people.

*"I think that umm that could definitely work if people were going out were aware of them and umm I guess it also depends on how much they respect what they're doing because I mean if somebody came up to me and said I needed a glass of water I'd be like who the hell are you?" (Participant 15)*

The ability to offer instrumental help, such as water, sustenance or help a person in distress to contact their friendship group or find a safe means of transport home was seen as important. It was also felt services were *"accepting and understanding"* (Participant 12) and that no legal implications would result from their use. The women believed that no such guarantees could be given by police;

*"They know the police there is always the question of law and if they're going to get in trouble. With volunteers they know that it's a voluntary service and they can't be*

*prosecuted. They're not in that sort of position to take legal action against them or whatever." (Participant 9)*

Finally, it was found that the young women felt that they could relate to volunteers as they were "not authoritative" (Participant 11), and often "closer to our age" (Participants 5). One participant stated that;

*"[...] because people are more likely to use someone that they know they can trust that aren't going to be...questioned. Like they don't want their mum sort of thing. They just want a friend that can help them." (Participant 9)*

It should also be noted that some of the interviewed women believed that the presence of volunteer services contributed to a safer atmosphere as they "prevented some people from doing stupid things around them." (Participant 12). Furthermore it was highlighted that these services could prevent problems from escalating as they would offer assistance to those women not yet incapacitated or aggressive.

*[...] just to have someone looking out for those sorts of behaviours could definitely stop a lot of the problems that might happen later on in the night. I think that would be good, just to have someone like you say, that's trained that could probably talk to them and just help before anyone gets into trouble.*

Despite the in depth discussion of helper characteristics and volunteer organisations, only two participants reported having seen the current intoxication management service (the Chill out Zone) available in the Fortitude Valley Safe Drinking Precinct. One participant reflected over the fact the awareness of this service was perhaps low among young people;

*"I work in the Valley so when I walk home on a Sunday morning I see like a truck or something with a chill out zone. I should (?) too bad and I know people use that, maybe not often enough or maybe because they're not very familiar with those things but actually I think it's a good idea." (Participant 3)*

## Discussion

The following discussion leads on from the literature review, observational and interview studies. Recommendations for interventions specifically targeting young women will be made throughout.

### *The licensed venue*

**RECOMMENDATION 1: It is the recommendation of this report that the safety behaviours young women were found to engage in might be used proactively as part of safety information regarding alcohol consumption.**

Perceptions of the licensed venues and night time entertainment precincts as risk filled and the self as vulnerable after consuming alcohol motivated a variety of safety behaviours among the interviewed women. Such behaviours centred on management of environmental threats and the mitigation of alcohol related vulnerability. The participants, particularly the younger ones, were generally reluctant to manage intoxication levels in order control alcohol related vulnerability, preferring to rely on the friendship group or manage threats from the environments as best they could. This tendency was even more pronounced in domestic settings where both alcohol related vulnerability and environmental threats was perceived as relatively low. In this sense, young women were more likely (although not always preferring to) manage intoxication levels in public spaces and furthermore employed a range of safety measures to counteract perceived risk which they did not do to the same extent in a private setting.

Safety behaviours identified included:

- Managing intoxication by;
  - limiting the amount of alcohol consumed,
  - monitoring their own intoxication levels and knowing when to stop
  - Consuming sustenance or water
  
- Staying with the friendship group (the most common safety strategy), to ensure protection from attacks by unknown others and to access help to manage adverse effects of alcohol consumption should it be needed. This was accomplished by;
  - an awareness of the whereabouts of all group members
  - the use of mobile phones
  - the use of a designated and safe meeting points

- by staying in pairs should the group split up
- Having a back-up plan in case separated from the group. Such plans included;
  - Having money put aside for a taxi fare
  - Being familiar with the area
  - Having a plan regarding how to get home (know where public transport or taxis are available)
- Within the friendship group ensuring that all members are safe. This was accomplished by;
  - Persuading intoxicated group members to slow down their alcohol consumption
  - Monitor behaviours of intoxicated group members to prevent behaviour deemed out of character
  - Providing special attention, supervision and care towards vulnerable group members
- Managing environmental threats
  - monitoring the surrounding crowd for any disturbances that might lead to violent or otherwise unpleasant altercations, and leaving before such incidents take place
  - being aware that intoxication often resulted in volatile and sometimes aggressive emotional states and that relatively small transgressions could trigger a hostile response
  - recognising that misunderstandings and communication difficulties (e.g., due to loud music) could make it difficult to manage hostile situations
  - diffusing situations quickly before they escalate
  - being aware of one's emotional state in order to prevent alcohol related aggression or hostility
  - monitoring drinks to prevent drink spiking

As previously discussed, the women were less likely to engage in safety behaviours such as intoxication management and controlling for environmental threats while consuming alcohol in a domestic setting (such as at a private party). However, it is noted that future research might be

needed to determine whether young women's perceptions regarding the relative safety of private parties correspond to actual harm.

### *Environment harm minimisation*

The women identified "other drunk people" as the largest threat present in entertainment precincts. Perception of others as a potential threat was influenced by not only the fact that they were intoxicated but also that they were unfamiliar (precluding the possibility to predict their behaviour) to the interviewed women. However, it was found that the decisive factor determining whether or not these "other drunk people" were regarded as a potential threat resided with the surrounding environment. Different environments appeared to create different expectations of what is acceptable or appropriate, with some 'high tolerance' environments displaying a greater social acceptance of extreme or offensive behaviour. Physical characteristics of high tolerance environments included poor lighting, crowdedness, worn or soiled decor, unclean and malodorous segments and a relative lack of social controls such as police or security personnel.

As part of the Drink Safe Precinct trial in the Fortitude Valley, several of the environmental attributes described as characterising high tolerance areas, are being addressed. For instance, the trial has seen an upgrade and installation of additional light sources and an increase in police numbers during peak offending time periods (Office of Liquor and Gaming Regulation, 2011). *It is acknowledged that addressing environmental factors in this manner may directly contribute to the safety of young intoxicated women.*

**RECOMMENDATION 2: It is the recommendation of this report that campaigns designed to raise awareness among young women as to issues associated with safe transportation after a period of drinking be developed and disseminated.**

A further risk associated with commonly frequented drinking environments related to the availability of safe transport, specifically in relation to the journey back home after a night out. For instance, the majority of the women felt that public transport was an unsafe transport alternative. Several initiatives are currently undertaken in the Fortitude Valley Drink safe Precinct to increase the safety and availability of public transport. However many of the dangers inherent to this form of transport, as identified by the young women, remain.

Some of the participants were also hesitant towards the use of taxi services to travel home. Mainly this concern was financial in nature; however a few women also reported that they avoided taxis as they felt vulnerable when travelling alone and intoxicated with the driver of the vehicle. Moreover, taxi drivers were not always willing to accept fares from overly intoxicated women and thus restricted the use this service, at times when it perhaps was needed the most.

For some women, the difficulties and risks associated with transiting late at night or during the early morning hours motivated a friendship group member to take on the role of designated driver, ensuring safe transport for all group members. However issues relating to this transportation option were also identified, particularly among the younger participants. While the authors are NOT suggesting changes to driver licensing practices, it is interesting to note that the young women interviewed raised the issue that P1 passenger restrictions were at times regarded as a barrier to getting home safely.

Although transiting was identified as a major safety concern by the interviewed women, with some stating that additional transport services for young intoxicated women should exist, the authors are hesitant to make recommendations accordingly. Such services would require substantial funding and what is more, concerns regarding inability to offer medical assistance after a young woman is delivered to her home must be resolved. Furthermore, to involve police in such services would represent a substantial drain on resources.

As such it is the view of the current authors that a viable approach would be to raise awareness among young women regarding transportation issues and problems that may arise. Safety strategies, such as having a back-up plan could be promoted to this end. Awareness regarding this issue could potentially be included in school and community based education and information.

### *Information and Awareness Campaigns*

**RECOMMENDATION 3:** It is the recommendation of this report that the alcohol related risk and protective behaviours uncovered in this study that are unique to young women are utilised in school and community based programs. It is recognised and emphasised that such information must be targeted (although not exclusively) at younger cohorts of women (under 18).

Investigations into communicating safety information to young women regarding alcohol consumption found that information and awareness raising campaigns received strong support from the women interviewed. It was a finding in the current study that early on-set of regular alcohol use necessitate school and community based information to be delivered to women prior to the legal drinking age.

In terms of communicated information, several findings from the current study can be drawn on, the majority of which would be particularly suitable to discuss with groups of women only. Safety behaviours previously outlined in this discussion could all be communicated to young women. Furthermore, one issue identified in the current study that pertains to women's safety while consuming alcohol could be addressed. For instance, the effects of alcohol could be discussed to decrease the risk of accidental intoxication through inexperience. Problems identified by the young women in relation to travelling back home after a night out could be discussed in this setting, with an emphasis on formulating a backup plan in case problems arise with initial arrangements.

School and community based information might also provide an opportunity to address the underlying group dynamics that were identified as influential to young women's drinking behaviour and safety. Two different group processes were identified; one that was described as a 'culture of helping' and one that was reminiscent of a 'badge of honour' mentality in relation to negative alcohol related outcomes. While the latter included a tendency to encourage extreme behaviours and heavy intoxication, groups that endorsed a culture of helping tended to curtail extreme behaviour and mitigate risks associated with heavy intoxication. As such, examining and discussing current group dynamics through informal conversations with friendship groups while emphasising the importance of mutual trust and reliance might prove beneficial. Such discussions might give young women a chance to negotiate a safe and sensible group based approach to alcohol consumption, including agreed upon plans for managing any aversive effects related to intoxication.

Further, factors that were found to negatively impact on group based helping behaviours could be identified and discussed. Such factors identified in the current study include negative affective states, individual differences in risk perception and attitudes towards alcohol, age, maturity and previous alcohol related experiences. As stated by one young woman "knowing how your friends will react" was an important factor in ensuring that any potential issues with the group's ability to ensure the safety of its members were to the greatest possible extent avoided.

## *Intervention and treatment*

**RECOMMENDATION 4:** It is the recommendation of this report that any campaigns designed to influence young women's drinking take a holistic approach and incorporate both risk and protective strategies.

Several risk and protective factors leading up to or preventing negative alcohol related outcomes were identified in the analysis of the interview data (see Figure 2). In relation to brief interventions aimed at young women it is recommended that a holistic approach encompassing not only risk but also protective factors that may influence alcohol related outcomes is taken. In this context, the presented model provides a knowledge base on which individually tailored interventions can be formed. In other words, the model could be used to examine existing risk factors for individual young women that would require interventions. In a similar manner, it could be used to identify and strengthen any existing protective factors to decrease negative outcomes associated with alcohol consumption.

## *Intoxication management*

**RECOMMENDATION 5:** It is the recommendation of this report that

- Initiatives that emulate the characteristics and best practice approach to intoxication management identified in this research should be endorsed and supported.
- Further investigations into the perception and awareness of current services, such as the Chill out Zone, is conducted.

The interviewed women were asked to identify what type of assistance they thought they would need, should they find themselves incapacitated due to excessive intoxication. Commonly, the women suggested that efforts to contact their friendship group should be undertaken or alternatively that safe transport home was provided. Some women believed that police could assist with these management strategies. If these options were not available the women often spoke of the need to receive support similar to what would normally be given within the friendship group. That is, it was felt that an intoxicated and incapable woman needed to be protected against unknown others and to have her alcohol consumption and intoxication monitored and managed. It was also felt necessary that the woman in question was protected



from injury and that any behaviour on her behalf that was deemed out of character was managed.

During the discussion of the management of intoxicated young women, several<sup>7</sup> participants spoke of a volunteer organisation that had been present during their Schoolies celebrations (the Red Frogs). It appeared that this organisation was well regarded among young women and the willingness to use their services if in need had been high. The Red Frogs were thought to emulate many of the characteristics deemed important for helpers, both on an individual as well as organisational level. These characteristics are further discussed under the following heading.

Several factors were found to influence young women's willingness to use self-access intoxication management services. Organisations must be considered trustworthy and have a non-judgemental, non-authoritative approach; it was seen as essential that individual staff members were accepting and understanding of the women's problems. Moreover, the young women felt it important that no legal implications would result from seeking assistance from such organisations. The participants underpinned that the organisation's philosophy, along with its location and operating hours, should be known among young women in order to increase the willingness among this cohort to utilise it. Furthermore, it was considered important that staff were able to handle any adverse effect or situations relating to alcohol consumption, and to offer instrumental help, such as water or sustenance. Being able to help a person in distress contact their friendship group or find a safe means of transport home was also mentioned.

It should also be noted that some of the interviewed women believed that the presence of volunteer services contributed to a safer atmosphere as they lowered the social acceptance of anti social or offending behaviour. They also acted to prevent the escalation of alcohol related problems as they offered help to vulnerable young people often before negative outcomes had occurred. This ability to intercept early places self-access intoxication services in a unique position to help young intoxicated women, a service police is not able to provide.

Currently, the Chill out Zone operates in Fortitude Valley and Surfers Paradise, offering non-judgmental and confidential support to vulnerable individuals; an approach to the management of

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<sup>7</sup> Although several participants mentioned they were aware of volunteer organisations, only 2 women interviewed had used the services when needed.

intoxication that was supported in the finding of the current study. However, the interviewed women reported low awareness of the service; data on client use collected during a three month period indicate an average of just under 13 clients per night of operation (the services are open between 11pm and 5am) (Office of Liquor and Gaming Regulation, 2011). It may be that increased publicity focusing on conveying the underlying philosophy of the service might increase its use among young women, and young people in general.

### *Social Context*

**RECOMMENDATION 6: It is the recommendation of this report that further research be conducted that focuses on the broad and immediate social influences on young women's drinking.**

The social aspects that guided alcohol consumption and drunken behaviour appeared to be influenced by two factors; the social purpose of the event and the social control imposed on women by the environment or different regulatory bodies. A shared social purpose for drinking brought groups of people with similar alcohol related goals, behaviours and attitudes together. Such purposes could include large events, days of cultural significance (e.g., Anzac or Australian Day), or private celebratory events such as birthdays, twenty-firsts or hens nights. For such occasions the young women reported a planned decision to drink heavily resulting in less restrained and more rapid alcohol consumption which often lasted over longer periods of time. However, this shared goal, behaviours and attitudes towards alcohol consumption was also associated with particular licensed venues or entertainment areas. Often such places tolerated or even celebrated more extreme deviations from sober norms. The social acceptance of antisocial or offending behaviour endemic to particular venues or areas was found to be the second social factor that influenced young women's drinking and related behaviours.

Special events, places or occasion created alternative alcohol related norms which allowed the women to some extent to avoid the social stigma normally attached to public and excessive intoxication. In this sense, alternative norms around appropriate alcohol related behaviour meant that at occasions or times such as these, the women were often conforming to the existing (alternative) norms rather than breaking them. Several women reported how these alternative norms made them feel pressured to drink. This pressure could originate from within as participants felt uncomfortable or left if they did not conform. However, the women also reported that pressures

to conform sometimes originated from friends, who encouraged or badgered the woman in question to drink at the same pace as the rest of the group.

## Conclusions

The purpose of the current report was to undertake an examination of young women's drinking in and around public venues in order to document the underlying social and normative influences surrounding alcohol consumption as well as examine the associated cultural norms. This was achieved through a two-phase investigation involving an observational study as well as individual and focus group interviews. Analysis of the data revealed there were three broad topic areas for understanding young women's drinking. They included *Reasons for Drinking; Women's Understanding and Management of Risks; and Prevention and Management of Excessive Intoxication*. Out of these broad topic areas, six recommendations have been made in order to assist in the development and dissemination of strategies to reduce risky alcohol consumption by young women and the impact of associated harms.

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